

OFFICE OF HEALTHCARE FINANCING NEWSLETTER

Quarterly news and updates from the offices of EqualityCare/Medicaid, Pharmacy Services, and Kid Care CHIP.

Pharmacy

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Wyoming EqualityCare Implementation of Federal Tamper Resistant Prescription Legislation

On May 25, 2007 Section 7002(b) of the U.S. Troop Readiness, Veterans' Care, Katrina Recovery and Iraq Accountability Appropriations Act of 2007 was signed into law. The Center for Medicare and Medicaid Services (CMS) released guidance providing baseline requirements to States to define and implement tamper-resistant prescription pads as required by this law on August 17, 2007. On September 29, 2007 these requirements were delayed by President Bush until April 1, 2008.

The above law requires ALL written, non-electronic prescriptions for EqualityCare outpatient drugs must be executed on tamper-resistant pads in order for them to be reimburseable by the federal government. In order to meet the standards set forth in this law and to decrease prescription tampering to the greatest extent possible at this time, EqualityCare has instituted the following requirements.

In addition to all current Wyoming Board of Pharmacy Requirements for Tamper-Resistant Prescription forms, all prescriptions paid for by EqualityCare must meet the following requirements to ensure that tampering does not occur:

Written prescriptions:

- As of April 1, 2008 must contain one, and as of October 1, 2008, must contain all three of the following characteristics:
 - 1. One or more industry-recognized features designed to prevent unauthorized copying of a completed or blank prescription form. In order to meet this requirement all written prescriptions must contain:
 - Some type of "void" or "illegal" pantograph that appears if the prescription is copied.
 - May also contain any of the features listed within category one or that meets the standards set forth in this category.
- 2. One or more industry-recognized features designed to prevent the erasure or modification of information written on the prescription by the prescriber.

THIS REQUIREMENT APPLIES ONLY TO PRESCRIPTIONS WRITTEN FOR CONTROLLED SUBSTANCES!

In order to meet this requirement all written prescriptions must contain:

- · Quantity check-off boxes PLUS numeric form of quantity values OR alpha and numeric forms of quantity value
- Refill Indicator (circle or check number of refills or "NR") PLUS numeric form of refill values
- OR alpha and numeric forms of refill values
- May also contain any of the features listed within category one or that meets the standards set forth in this category.
- 3. One or more industry-recognized features designed to prevent the use of counterfeit prescription forms. In order to meet this requirement all written prescriptions must contain:
 - Security features and descriptions listed on the FRONT of the prescription blank.
 - May also contain any of the features listed within category three or that meets the standards set forth in this category.

Computer Printed Prescriptions:

- As of April 1, 2008 must contain one, and as of October 1, 2008, must contain all three of the following characteristics:
 - 1. One or more industry-recognized features designed to prevent unauthorized copying of a completed or blank prescription form. In order to meet this requirement all prescriber's computer printed prescriptions must contain:
 - Same as above for this category.
 - 2. One or more industry-recognized features designed to prevent the erasure or modification of information written on the prescription by the prescriber. In order to meet this requirement all prescriber's computer printed prescriptions must contain:
 - Same as above for this category.
 - 3. One or more industry-recognized features designed to prevent the use of counterfeit prescription forms. In order to meet this requirement all prescriber's computer printed prescriptions must contain:
 - Security features and descriptions listed on the FRONT or BACK of the prescription blank.
 - May also contain any of the features listed within category three or that meets the standards set forth in this category.

Inclusion of other industry recognized features on a prescription are acceptable if desired, however, the above features will be mandatory for all prescriptions paid for by EqualityCare as of the dates referenced above. Please refer to the OPS Website at www. health.wyo.gov/healthcarefin/pharmacy and click on the Tamper-Resistant Prescription Pads tab for more detailed information and requirements.

The Office of Pharmacy Services has been consistently involved in the process of interpretation of this legislation via participation in a national workgroup and direct interactions with CMS. We also continue to be available to answer questions and provide information to providers and recipients as necessary.

On the other side:

- Kid Care CHIP
- EqualityCare

Provider Identifier (NPI) Update

As of May 23, 2008, all Wyoming EqualityCare pharmacy claims are required to contain both the pharmacy provider's NPI number and the prescriber's NPI number. Pharmacy claims will not be reimbursed by Wyoming EqualityCare if both NPI numbers are not on the pharmacy claim.

To assist pharmacies in obtaining a prescriber's NPI number the Centers for Medicare and Medicaid Services (CMS) provides a website that is accessible to both pharmacies and prescribers. There is not a charge to use the NPI registry. NPI searches can be conducted by entering the prescriber's name. The website is:

https://nppes.cms.hhs.gov/NPPES/NPIRegistrySearch.do?subAction=reset&searchType=ind



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In 2003, only 22 percent

of all children enrolled in Kid Care CHIP and <u>38 percent</u> of five- and six-year-old enrolled children utilized preventive dental services. Such services are essential for establishing good oral health and identifying other dental issues that require the provider's intervention. The program also found that some children did not obtain preventive care because they had used their entire \$1,000 yearly Kid Care CHIP dental allowance on therapeutic services.

In 2006, Wyoming's Kid Care CHIP Program worked with its dental contractor – Delta Dental, the president of the Wyoming Dental Association, and other dentists enrolled in the SCHIP program to implement the "Healthy Kids Need Healthy Smiles" initiative, an effort to educate families on the importance of prevention, benefit utilization, and good overall oral health. The approach came as the Department of Health was conducting an overall push on prevention throughout all its programs.

With the support of Delta Dental, the Wyoming Dental Association and participating dentists, the program decided it was

necessary to find new and creative ways to encourage the use of available preventive dental benefits. The first step was to remove preventive services from the \$1,000 yearly cap on total dental benefits. By making this change, a barrier to the ability of SCHIP children to obtain cleanings, exams, x-rays, fluoride treatments, and sealants was removed.

The second step was to implement new "reminders" for families. These reminders have come in the way of a quarterly family newsletter, dental magnet appointment reminder cards, clings for bathroom mirrors that reinforce the importance of brushing and remind children how often they should brush, and postcard reminders of available dental benefits. The program also began sending out postcards to families who were close to using up their annual benefit but had not had a preventive visit.

Wyoming has found that overall utilization within the program has increased since the Healthy Kids Need Healthy Smiles Initiative was implemented. In 2007, <u>51 percent</u> of all children and <u>64 percent</u> of five- and six-year-old children used preventive dental benefits.

Because of the efforts of the Kid Care CHIP program and Delta Dental, the Centers for Medicare and Medicaid Services (CMS) has nominated and presented the program with the SCHIP Promising Practice award for Dental Education.



EqualityCare

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Overview of the Healthy Together program

The *Healthy Together!* program aims to increase outcomes and reduce healthcare costs by preventing the occurrence of acute and chronic illnesses, leveraging technology to improve efficiencies and networking with community resources to manage preventable health risks.

The program's tools and resources provide tailored communication that addresses lifestyle issues and motivation for change. Tools and resources include clinicians to reinforce providers' treatment plans, 24 hour telephonic support, health risk assessments, lifestyle management programs, smoking cessation and stress management, tailored wellness programs, diet/fitness planning, comprehensive educational offerings and coordination of care.

Outcomes from 2007

In 2007, there were 67,965 EqualityCare clients with at least one month of eligibility for *Healthy Together!* services. During that calendar year, the *Healthy Together!* Program experienced positive outcomes in several areas:

- More asthmatic patients received prescriptions for long-term medication use and had reductions in emergency room visits.
- The program experienced reductions in the rate of inpatient and ER visits for patients with a diagnosis of depression.
- There was an increase in the percentage of clients with a flu shot who have been diagnosed with COPD, heart disease, diabetes, or asthma.
- Inpatient hospital rates decreased.
- EqualityCare clients and medical providers responded very highly in a satisfaction survey for the Healthy! Together program.

Target Areas for 2008

The *Healthy Together* Program continues to focus on the quality areas listed above and is also working to get better outcomes in the following areas:

- Encouraging more patients to develop self-action plans.
- Promote diabetic patients to get LDL-tests.
- Assist women between the ages of 42-69 to get mammograms.
- Reduce the overall emergency room rate for Wyoming Medicaid patients.

Facts and Figures

EqualityCare

JUNE 2008 CORRECTION:

Child Enrollment: 36,661

Total Enrollment: 57,801

September 2008

Child Enrollment: 37,059

Total Enrollment: 58,247

Kid Care CHIP September 2008

Child Enrollment: 6,002



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